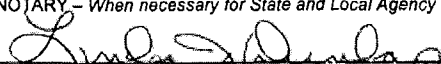
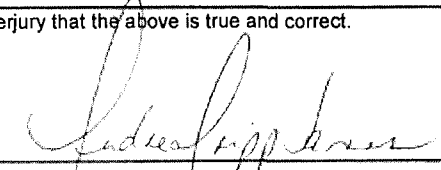
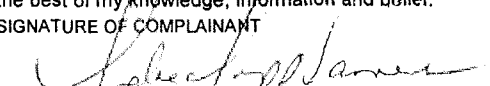


## **Exhibit B**

### **to Defendants' Notice of Removal**

Filed Charge of Discrimination

EEOC Form 5 (11/09)

<b>CHARGE OF DISCRIMINATION</b> <small>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</small>		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <b>436-2016-00390</b>	
<b>South Carolina Human Affairs Commission</b> and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) <b>Ms. Andrea F. James</b>		Home Phone (Incl. Area Code) <b>(803) 407-9154</b>	Date of Birth <b>07-12-1971</b>
Street Address City, State and ZIP Code <b>113 Chadford Circle, Irmo, SC 29063</b>			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>RICHLAND COUNTY RECREATION COMMISSION</b>		No. Employees, Members <b>201 - 500</b>	Phone No. (Include Area Code) <b>(803) 741-7272</b>
Street Address City, State and ZIP Code <b>7473 Parklane Road, Columbia, SC 29223</b>			
RECEIVED DIRECTOR			
Name 		No. Employees, Members 	Phone No. (Include Area Code) <b>FEB 08 2016</b>
Street Address City, State and ZIP Code 			
EEOC Greenville Local Office Greenville, SC			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest <b>04-01-2014 01-06-2016</b> <input checked="" type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <b>I have worked for Respondent since July 2011 and have been promoted to Division Head of Finance (CFO). During my tenure, I have performed my duties satisfactorily. I am an African American female.</b>  <b>Beginning in 2014, I was subjected to sexual comments and advances by Mr. James Brown III (Executive Director). I engaged in protected activity by complaining to Mr. David Stringer (HR Director). Mr. Brown III has retaliated against me by routinely threatening to fire me since that initial complaint. In December 2015, Mr. Brown III moved my department from Ms. Kenya Bryant's supervision to his own. Mr. Brown III threatens to fire me as a result. I once again file a complaint with Mr. David Stringer (HR Director). On January 6, 2015, Mr. Brown III called an unscheduled staff meeting after my complaint to HR. Mr. Brown III states that he has promoted my peer to a newly created Chief of Staff position. Mr. Brown III stated that this new person is a "punisher" and will enjoy punishing me.</b>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements 	
I declare under penalty of perjury that the above is true and correct. <b>4/6/16</b>  Date Charging Party Signature		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) <b>February 4, 2016</b>	

EEOC Form 5 (11/09)

<p align="center"><b>CHARGE OF DISCRIMINATION</b></p> <p>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</p>	<p>Charge Presented To:      Agency(ies) Charge No(s):</p> <p><input type="checkbox"/> FEPA</p> <p><input checked="" type="checkbox"/> EEOC      <b>436-2016-00390</b></p>
<p align="center"><b>South Carolina Human Affairs Commission</b>      and EEOC</p> <p align="center"><i>State or local Agency, if any</i></p>	
<p><b>I feel that I have been discriminated against in violation of Title VII of the Civil Rights Act of 1964, as amended as it pertains to my Sex (Female) and Retaliation.</b></p>	

<p>I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</p>	<p>NOTARY – When necessary for State and Local Agency Requirements</p>
<p>I declare under penalty of perjury that the above is true and correct.</p> <p>_____</p> <p align="center"><i>Date</i>      <i>Charging Party Signature</i></p>	<p>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</p> <p>SIGNATURE OF COMPLAINANT</p> <p>_____</p> <p>SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE</p> <p align="center"><i>(month, day, year)</i></p>